

PLEASE TYPE OR PRINT

☐ Ms.

☒ Mr. Artist PAUL MISSAL
(Last Name Last)

Permanent Address 0430 SW MILES, PORTLAND, OR
Street City

97219 Tel. (503) 244-5182
Zip Area Code

Temporary Address _____
Street City

Tel. () _____
Zip Area Code

Permanent address is in what county? _____

Born in Cuyahoga County ☒ Yes ☐ No

Collaborator _____
(If Any)

If entries are not accepted or not sold:

☐ Artist will pick up entries at Museum.

☐ Museum should dispose of entries.

☒ Museum should ship entries to artist C.O.D. at this address:

0430 S.W. MILES ST

PORTLAND, ORE, 97219

The attached card will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed below.

It is also understood that accepted entries will remain on exhibition until June 10, 1973.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

Paul Missal

CATEGORY ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
ENTRY ONE ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Acrylic

Title

5 OF MILK

A knife, two pencils, 2 bars of soap, & a glass of milk

Price or NFS

500⁰⁰

Insurance Value
If NFS Only

Size

35" x 36"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional
No. For Sale

Total No.
in Edition

Price
Unframed

Price
of Frames

Additional
No. of Frames
For Sale

DO NOT WRITE IN THIS SECTION

249 (1)

ACCEPTED

REJECTED

FEE PAID

BY

3/22/73

MAA

CATEGORY ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
ENTRY TWO ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Title

Price or NFS

Insurance Value
If NFS Only

Size

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ACCEPTED

REJECTED

RECEIVED

BY

4/22/73 TH